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FAX TRANSMISSION**OFFICIAL****DATE:** November 13, 2003**PTO IDENTIFIER:** Application Number 09/655,667
Patent Number**Inventor:** Karen L. Briegs**MESSAGE TO:** Examiner Natalie A. Pass**FAX NUMBER:** (703) 305-7687**FROM:** DARBY & DARBY P.C.

Laura C. Brutman

PHONE: (212) 527-7664**Attorney Dkt. #:** 02994/100F606-US1**PAGES (including Cover Sheet):** 19**CONTENTS:** Amendment Transmittal (1 page) and
Supplemental Amendment in Response to Non-Final Office Action (17 pages).

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Amendment Transmittal (1 page) and
Supplemental Amendment in Response to Non-Final Office Action (17
pages).

AMENDMENT TRANSMITTAL LETTER				Jocket No. 02994/100F606-US1	
Application No. 09/655,667	Filing Date September 6, 2000	Examiner Natalie Pass	Art Unit 3626		
Applicant(s): Karen L. Briegs					
Invention: CLINICAL TRIALS MANAGEMENT SYSTEM					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	45	- 45 =		x	0.00
Independent Claims	5	- 5 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input checked="" type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Laura C. Brutman Attorney Reg. No.: 38,396				Dated: <u>November 13, 2003</u>	
DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7717					


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Application No.: 09/655,667

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Docket No.: 2994/1F606US1

Remarks/Arguments begin on page 14 of this paper.

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